

Owner/Manager

RE: Business License

Business Address:

Dear Business Owner:

Under Frederick Municipal Code Sec. 6-1 any person or entity operating a business in the Town of Frederick is required to obtain a business license and pay an annual business license fee. The Business License year begins January 1st through December 31st. It is the responsibility of the business owner to ensure that the business license is renewed and fee is paid each year.

Enclosed you will find an application for a General Business License, license fees list and Business Fill Update Form. Please complete both front and back of the attached form and return to Town Hall along with the correct fee, proof of liability insurance and Workman's Compensation Insurance, if applicable, by January 15, 2007. According to Frederick Municipal Code Article 1, Sec. 6-14 any person who fails to obtain a business license may be imposed a penalty.

If you have any questions please don't hesitate to call me at (303) 833-2388.

Thank you,

A handwritten signature in cursive script that reads "Linda Blount".

Linda Blount
Town of Frederick

Important Note:

If your business has closed, you must notify the town in writing of the date of closure. Please sign and date the letter and return to our office



TOWN OF FREDERICK

401 LOCUST STREET • P.O. BOX 435 • FREDERICK, CO 80530-0435
PHONE: (303) 833-2388 • FAX: (303) 833-3817

BUSINESS LICENSE APPLICATION Please Print

1. Trade Name (DBA): _____
2. Location of Business _____
Street Address City State Zip
3. Mailing Address: _____
Street Address City State Zip
4. Phone No. _____ Fax No. _____ E-mail address _____
5. Owner Name: _____
6. Owner Address: _____
7. Please supply the Town with a copy of your Certificate of Good Standing or if you are a Sole Proprietor or Partnership; please complete and return the attached Lawful Presence Affidavit on back of application.
8. State Sales Tax I.D.: _____
9. What is the main operation of the business? _____
10. Is this a home based business? ____ Yes ____ No
11. Type of Business: ____ Retail ____ Manufacturing ____ Service ____ Wholesale Trade
____ Trade Construction ____ Other (please describe) _____
12. What is the Zoning for this Business location? _____
13. Number of Employees: _____ Full Time _____ Part Time

Proof of liability insurance and (if you have employees) Workers Compensation insurance, must be submitted at time of application.

Insurance Company: _____

Name of Agent: _____ Phone: _____

I declare under penalty of perjury in the second degree that the statements made in this questionnaire are true and complete to the best of my knowledge.

Authorized Signature: _____ Date: _____

Printed Name: _____ Title: _____

PLEASE COMPLETE APPLICATION (both sides), ATTACH APPROPRIATE DOCUMENTATION AND FEE; THEN RETURN TO FREDERICK TOWN HALL BY MAIL OR IN PERSON

THANK YOU!

For Office Use Only:

Planning Department _____ Business File Update Form _____ Unlawful Presence Affidavit _____
License Classification: _____ Fee: \$ _____ Method of Payment: _____ Cash _____ Check # _____

LAWFUL PRESENCE AFFIDAVIT

I, _____, swear or affirm under penalty of perjury under the laws of the State of Colorado that (check one):

☐

I am a United States citizen, or

☐

I am a Permanent Resident of the United States, or

☐

I am lawfully present in the United States pursuant to Federal law.

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

Signature

Date

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BUSINESS FILE UPDATE PLEASE PRINT

Date: _____

Name of Business: _____

Business Address: _____

Mailing Address: _____

Business Phone #: _____

E-Mail Address: _____

Alarm ☐ YES ☐ NO *If yes, please provide;*

Alarm Company: _____

Alarm Company Phone Number: _____

Any particular hazards at this address? (Please describe) _____

After Hours Contacts:

1. Name: _____

Home Phone #: _____ Cell/Pager #: _____

2. Name: _____

Home Phone #: _____ Cell/Pager #: _____

3. Name: _____

Home Phone #: _____ Cell/Pager #: _____

Agency: Frederick Police Department
333 5th Street – P.O. Box 639
Frederick, CO 80530
(303) 833-2468
Fax # (303) 833-0555

Entered _____
Dispatch Advised _____



Town of Frederick

P.O. Box 435
401 Locust Street
Frederick, CO 80530
303-833-2388
303.833-3817 (fax)

General Business License Fees

Sec. 6-31 Business General

1,000 sq. ft. or less	\$25.00
1,000 sq ft. or more	\$50.00
Storage / warehouse	\$100.00
Industrial	\$150.00

Sec. 6-39 Home Occupations

Occupations Performed from a residence	\$25.00
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Sec. 6-42 Food Vendors

Health Dept. License Required	\$25.00
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Sec 6-42 Peddlers and Solicitors

Per Day/Per Peddler	\$10.00 per day
Per Month/Per Peddler	\$100.00 per mo.
Copy of Drivers License Required	

Sec 6-44 Refuse Hauling	\$350.00
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Disclaimer: If your business does not meet any of the above classifications please contact Town Hall for appropriate fee.